

From complex needs to complex intervention – example of FamResPlan research project



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Introduction

The overall objective of the research project Specific characteristics of families at risk: contribution to complex interventions planning (FamResPlan) is to identify characteristics of specific groups of families at risk – their risk factors, readiness for change and intervention, and the life satisfaction of family members. As a set of new, understudied processes placed in the context of the family resilience concept, project findings could be of importance for complex interventions planning. The comprehensive FamResPlan study of families at risk is being conducted at the moment and the sample will consist of 200 families with various complex needs for intervention and support that have at least one member with serious behavioral problems.

The aim of this presentation is to discuss the findings regarding the complex needs of families with at least one adult member diagnosed with an addiction disorder.

Complex needs

• one or more family members have problems in two or more areas of life at the same time (academic achievement, dropping out of school, emotional and behavioral problems, mental health, drugs and/or alcohol abuse, maltreatment and neglect, law breaking behaviors or others)

• one or more members of the family, because of those problems, have the need for support, treatment or intensive supervision that are being carried out by two or more intervention systems (social care, health and mental health care, alcohol or drug abuse treatment, education, justice system)

Žižak, Novak, Kranželić, Jandrić Nišević and Kovčo Vukadin, 2016

Studied problems of those diagnosed with addiction disorders and their family members

Perception of support

Family life satisfaction

Readiness for change

Family communication

Family resilience factors

Instruments

- Demographic information
- Family Satisfaction Scale and Family Communication Scale, FACES-IV (Olson i Gorall, 2006)
- Readiness to show support and perception of support in the family (Ratkajec Gašević, Dodig Hundrić, Mihić, 2016)
- Stages of Change Questionnaire (Prochaska, Velicher, 1983)
- Family Resilience Questionnaire (FamResPlan, 2017)

Sample

A representative sample of the survey included 29 patients from 2 university hospitals in Zagreb, Croatian capital and 23 of their family members.

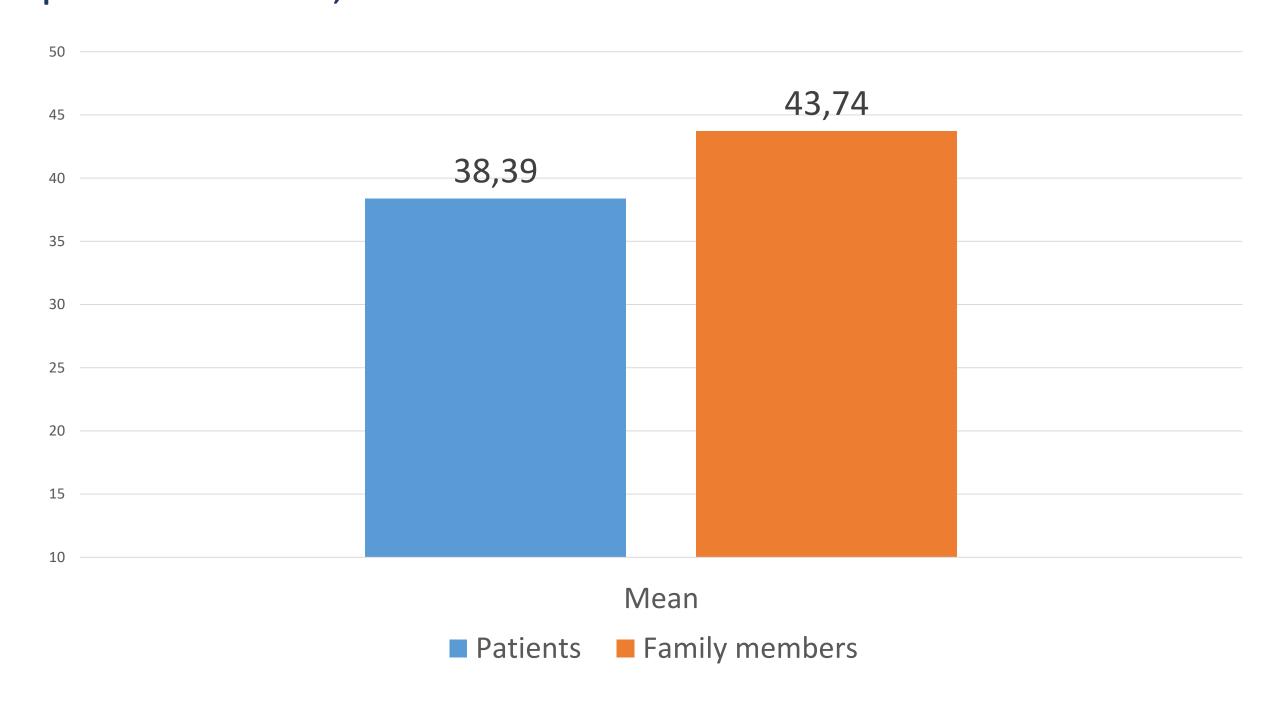
- age of the patients was 21 to 68 (M=40,66; SD=10,88)
- 79,3% male and 20,7% female
- 72,4% finished high school as their final level of education
- 55,2% of participants are married and living with their spouse, 17,2% of them are single; 65,5% of the participants have children

Procedure

- In the presented study, complex needs are assessed by self-report from addiction clinic patients as well as by self-report from one of their family members.
- In addition, complex needs for intervention are assessed by a mental health professional from the addiction clinic (data still being collected).

Perception of support

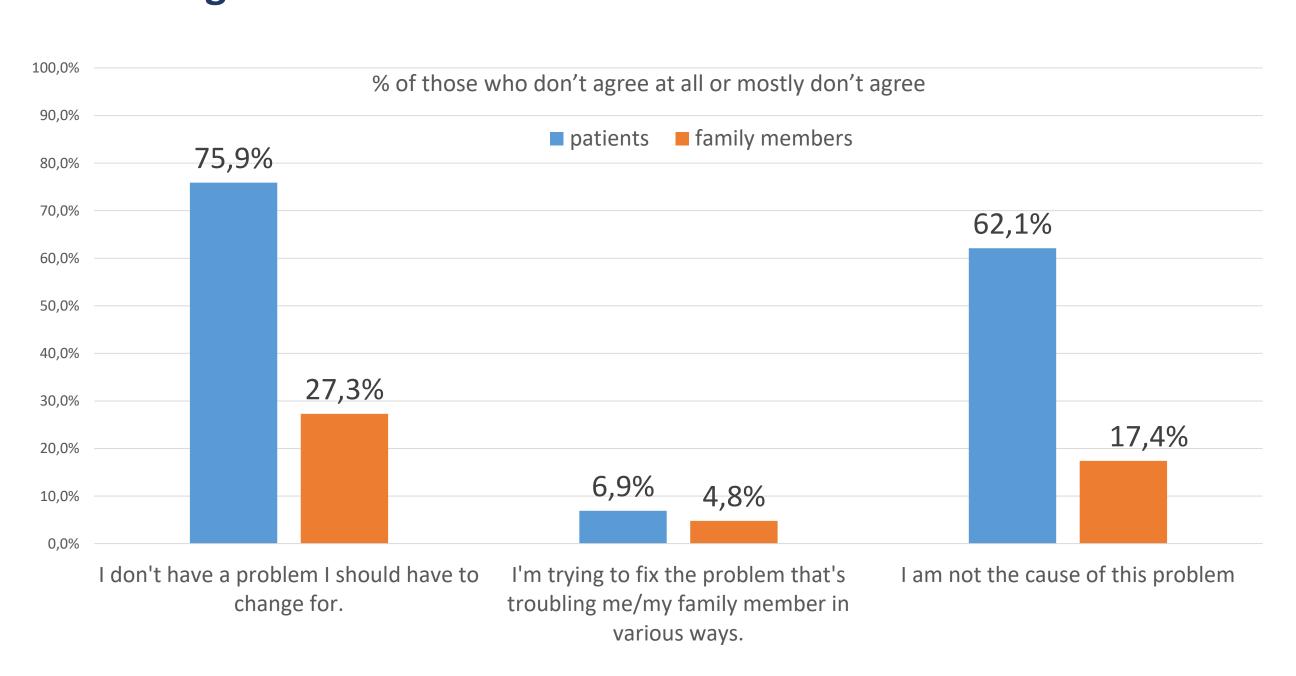
Minimal possible result was 10, maximum 50.



Family life satisfaction

- 6,7% of the patients are mostly unhappy with the degree of closeness among the members of their family, while 17,3% of their family members say that they are mostly or very unhappy with that
- 10,3% of the patients are mostly unhappy with the ability of their family to deal with stress, while
 21,7% of their family members say that they are mostly or very unhappy with that

Readiness for change



Family communication

% of those that mostly or strongly disagree

- Family members are happy with how they communicate 27,6% patients, 34,8% family members
- Family members are willing to listen what others have to say 20,7% patients, 21,7% family members
- Family members are showing affection to each other 3,4% patients, 8,7% family members
- Family members can ask what they want from each other— 10,3% patients, 21,7% family members

Family resilience factors

% of those that mostly or strongly disagree

- making important family decisions together— 17,2% patients, 8,7% family members
- mutual understanding when going through tough times 20,7% patients, 13,0% family members
- Family members understand each other 13,8% patients, 8,7% family members

To conclude

The previously mentioned complex constructs provide a deeper insight into the complex processes regarding intervention needs of families at risk. These insights can be used as a good foundation for developing complex interventions for this specific target group – families with one member diagnosed with an addiction disorder. As well, the results from this study provide basic information for the development of research informed preventive interventions related to the concept of family resilience.

This presentation has been fully supported by Croatian Science Foundation under the project IP-2014-09-9515.

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